CQC findings on Fit and Proper Persons at West Suffolk NHS Foundation Trust, 30 January 2020

"Arrangements remained in place to ensure that directors were fit to carry out their responsibility in accordance with Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The trust policy and procedure "Fit and Proper Person Requirements", version two, dated May 2019 referenced the most recent CQC guidance document for providers and inspectors, January 2018. It included a standard to undertake, where a director meets the eligibility criteria, an enhanced Disclosure and Barring Service (DBS) check to establish whether the person is on the children and / or adults safeguarding barred list and whether they are prohibited from holding the office in question under other laws such as the Companies Act or Charities Act and this was also included within the self-declaration form. The policy and procedure outlined that a selfdeclaration form be completed as part of the appointment process and yearly as part of the annual appraisal process. We reviewed the personnel files of all of the executive directors, the chair and four NEDS. The files demonstrated that appropriate FPPR checks had been undertaken and included records of the recruitment process, interview notes, reference checks, disclosure and barring service (DBS) check, employment history and selfdeclaration. All files detailed an annual appraisal with current objectives outlined, although those of the NEDs were extremely brief. The executive director appraisals included a midyear appraisal check and closure of 2018/19 objectives which were rated as red (due date passed), amber (progress of trajectory), green (on trajectory) or black (completed). We found that there were some inconsistencies in the record completion of all of the relevant checks and appraisals. For example, in three of the six executive directors' files detail was not recorded in relation to the recruitment and interview process or copies of references (although the checklist had been ticked to indicate these had been provided). Similarly, there was no evidence of recruitment, interview or actual references in three of the four NED files reviewed. Information provided after inspection identified references were held, however these were inconsistent. Out of the six files reviewed (the chair and NEDs) three had two references and three had only one, including that of the most recently appointed NED in September 2018. Details of another candidate were included in the chief nurses electronic file. The NED and chairs appraisals were not signed or dated by either the appraiser or appraisee, despite there being boxes for this to take place. We were able to note that these were current appraisals by the date they were electronically filed. "

https://api.cqc.org.uk/public/v1/reports/ebc3a889-b6b1-4746-8f9e-bae56830862f?20210114105252

https://www.cqc.org.uk/sites/default/files/West_Suffolk_NHS%20Foundation_Trust_Eviden ce appendix published 30 January 2020.pdf